Vass Community Room Rental Agreement

Person Responsible	e:				
Address:	Phone:				
Date of Function:		Estimated number of Participants		nts:	
Hours to be used:_					<u></u>
	Town Resident/Property	Owner Non	n-Resident		
Rental Fee:	\$100/day	\$	125/day		
Refundable (Cleaning Deposit: \$1	00			
If paying by check	, please write two s	eparate checks	made pay	able to To	wn of Vass.
I agree to as	sume the responsibil	ty for the use and	d care of th	e Town of	Vass Community
Room/kitchen/restro	ooms/entrance foyer	and agree to leav	e them cle	an and in o	order. I understand
that I will be held lia	able for any missing, o	damaged or soile	d property	and agree	to compensate the
Town of Vass for sa	ame.				
The Town of	Vass accepts NO RI	SPONSIBILITY	for damage	e or loss to	any person or
property occurring o	during the use of the	meeting room or p	parking lot		
Date:					_
		Signature of Pers	son Respo	nsible	
Town of Vass Repr	esentative	Front Door Key Is	ssued:	/ N	
Federal laws prohib are not required to t used in evaluating y not to furnish it, we	iting discrimination a furnish this information your application or to	gainst applicants on, but are encour discriminate agai he ethnicity, race	seeking to aged to do nst you in	participate so. This in any way. H	onitor compliance wit e in this program. You nformation will not be lowever, if you choose dividual applicants on
Ethnicity:	Hispanic or Latino	☐ Not Hispanic o	or Latino		
	nerican Indian/Alaska ack or African Americ nite		Asian Native Haw	aiian or Oth	ner Pacific Islander
Gender: □	Female	□ Male			

This is an Equal Opportunity facility. Federal law prohibits discrimination. To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S. Room 326-W., Whitten Building, 14th and Independence Avenue, SW, Washington, DC 20250-9410 or call (800) 795-3272 (202) 720-5964 (voice) or (202) 720-6382 (and TDD).